

STATE OF CONNECTICUT

OFFICE OF THE SECRETARY OF THE STATE

REGISTRATION OF CANDIDATE COMMITTEE

Appointment of Campaign Treasurer, Deputy Campaign Treasurer
Form ED-49, Rev. 8/05


☐

INITIAL FILING

☐

AMENDMENT

Do Not Mark in This Space
For Official Use Only

1. ELECTION DATE		2. PRIMARY DATE		11. TREASURER (NAME, COMPLETE ADDRESS, ZIP)	
3. OFFICE SOUGHT		4. DISTRICT NO (if applicable)			
5. CANDIDATE (NAME, COMPLETE ADDRESS, ZIP)				12. TREASURER'S E-MAIL ADDRESS	
MAILING ADDRESS (if different)					
6. TELEPHONE				13. TELEPHONE	
7. NAME OF COMMITTEE				14. DEPUTY TREASURER (NAME, COMPLETE ADDRESS, ZIP)	
MAILING ADDRESS (if different)					
8. CANDIDATE'S E-MAIL ADDRESS				16. DEPOSITORY INSTITUTION (NAME & ADDRESS, ZIP)	
9. COMMITTEE'S WEBSITE ADDRESS					
10. PARTY AFFILIATION					
<input type="checkbox"/> Republican <input type="checkbox"/> Democratic <input type="checkbox"/> _____ (other)				15. TELEPHONE	

I, the undersigned, do hereby accept the responsibilities of campaign treasurer of the above named committee, until the Committee is terminated. I understand that I may resign at any time by notifying the candidate and by filing a letter of resignation with the proper authority (Secretary of the State/Town Clerk).

TREASURER (SIGNATURE)_____
DATE

I, the undersigned, do hereby accept the responsibilities of deputy campaign treasurer of the above named committee, until the Committee is terminated. I understand that I may resign at any time by notifying the candidate and by filing a letter of resignation with the proper authority (Secretary of the State/Town Clerk). I understand that I assume the duties as treasurer if the treasurer is unable to perform his duties for any reason.

DEPUTY TREASURER (SIGNATURE)_____
DATE

I, the undersigned, do hereby certify that I am the candidate named above; that I have appointed the persons named above, electors of the State of Connecticut, as Campaign Treasurer and Deputy Campaign Treasurer, and they have accepted such appointments in conformity with the requirements of Chapter 150 of the Connecticut General Statutes. I will immediately notify the filing authority of any changes in the above information.

Any person who knowingly and willfully violates any provisions
Of Chapter 150, C.G.S. shall be fined not more than \$5,000 or
Imprisoned not more than five years or both (Sec. 9-333y C.G.S.)

CANDIDATE (SIGNATURE)_____
DATE

INSTRUCTIONS

This designation must be signed by the campaign treasurer, the deputy campaign treasurer (if applicable), as well as the candidate. No candidate may form more than one Candidate Committee. A candidate must designate a Campaign Treasurer to be responsible for receiving contributions, making expenditures and filing the itemized sworn statements required by Sec. 9-333j. A Deputy Campaign Treasurer may also be appointed. The Campaign Treasurer and Deputy Campaign Treasurer must be electors of this state. A candidate may not serve as his/her own Campaign treasurer or Deputy. A single checking account must be established with a depository institution situated in this state. This registration form must be on file with the proper authority before any contributions are made, solicited or received and before any expenditure is made.

Important Notice: Failure of a candidate to designate either candidate committee and file “*Registration of Candidate Committee*”, Form ED-49, or qualify for and file “*Certification of Exemption from forming a Candidate Committee*”, Form B-4, within 10 days of becoming a Candidate, will subject the candidate to a **mandatory \$100 fine**.

File with the Secretary of the State (Campaign Finance Section, P.O. Box 150470, 30 Trinity St., Hartford, CT 06115): Candidates for the office of governor, lieutenant governor, secretary of the state, treasurer, comptroller, attorney general, judge of probate, member of the general assembly.

File with the Town Clerk: Committees formed for any town, city or borough office and any candidate involved in a primary for the position of town committee member.

Any time any information contained on this form changes, the candidate must submit an amended Form ED-49. If you have any questions concerning filing dates or if you need additional forms, please call the Campaign Finance Section at (860) 509-6101. If you need guidance in the proper reporting of certain contributions or expenditures; or if you have questions pertaining to the interpretation of the campaign finance statutes, please call the State Elections Enforcement Commission at (860) 566-1776.

1. ELECTION DATE:

Provide the election date for which the committee is formed.

2. PRIMARY DATE:

Provide the primary date for which the committee is formed.

3. OFFICE SOUGHT:

Provide the name of the office being sought.

4. DISTRICT NO:

Provide, if applicable, the district number of the office sought.

5. CANDIDATE:

Provide the full name and complete address of the candidate; number, street, town, state and zip code.

6. CANDIDATE'S PHONE:

Provide the candidate's phone number.

7. NAME OF COMMITTEE:

Provide the full name of the committee.

8. CANDIDATE'S E-MAIL ADDRESS:

Provide e-mail address of candidate, if any.

9. COMMITTEE'S WEBSITE ADDRESS:

Provide Committee's website address, if any.

10. PARTY AFFILIATION:

Check the appropriate Political Party box.

11. TREASURER:

Provide the full name and complete address of the Treasurer of the committee; number, street, town, state and zip code. Indicate mailing address, if different.

12. TREASURER'S E-MAIL ADDRESS:

Provide e-mail address for the Treasurer, if any.

13. TREASURER'S PHONE:

Provide the Treasurer's phone number.

14. DEPUTY TREASURER (OPTIONAL):

Provide the full name and complete address of the Deputy Treasurer of the committee; number, street, town, state and zip code. Indicate mailing address, if different.

15. DEPUTY TREASURER'S PHONE:

Provide the Deputy Treasurer's phone number.

16. DEPOSITORY INSTITUTION:

Provide the complete name, address, and zip code of the financial institution, located in the state, for the deposit of contributions into a single checking account.